

Table 2. Staging Pressure Ulcers

Stage	Definition	Appearance	Appropriate topical treatment	Average healing time (d)
I	Nonblanchable erythema of intact skin	Pink skin that does not resolve when pressure is relieved; discoloration; warmth; induration	DuoDerm q2-3d	14
II	Partial-thickness skin loss involving epidermis and/or dermis	Cracking, blistering, shallow crater, abrasion	Cleanse with saline; DuoDerm/Tegaderm dressing	45
III	Full-thickness skin loss into subcutaneous fatty tissues or fascia	Distinct ulcer margin; deep crater (in general, 2.075 mm or deeper [the thickness of a nickel])	Debride; irrigate with saline; apply DuoDerm/Tegaderm	90
IV	Full-thickness skin loss with extensive tissue involvement of underlying tissues	Extensive necrosis; damage to underlying supporting structures, such as muscle, bone, tendon, or joint capsule	Surgically debride; irrigate with saline (possibly under pressure); apply advanced topical dressings; consider antibiotics	120

*When the overlying skin is necrotic, the staging cannot be accurate until debridement is performed.